

FORMALITIES LETTER



OC00000005063316

UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark OfficeAddress: COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/510,966 | 02/21/2000 | Rohit V Gaikwad | 1789-01910 |

23505
CONLEY ROSE & TAYON, P.C.
600 TRAVIS, SUITE 1800
HOUSTON, TX 77002



Date Mailed: 04/19/2000

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

07/06/2000 MURKIN 00000037 09510966
02 FC:205
65.00 OP



Please type a plus sign (+) inside this box → **[+]**

Approved for use through 9/30/00. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Sector \$
JFB

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|------------------------------------------|---|------------------------|-------------------------|
| | | Application Number | 09/510,966 |
| | | Filing Date | February 21, 2000 |
| | | First Named Inventor | Rohit V. GAIKWAD et al. |
| | | Group Art Unit | 2734 |
| | | Examiner Name | UNKNOWN |
| Total Number of Pages in This Submission | 5 | Attorney Docket Number | 1789-01910 |

ENCLOSURES (check all that apply)

| | | |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | 1. Part 2-Copy of Missing Parts Notice; 2. \$120.00 Check; and 3. Acknowledgment postcard. |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Small Entity Statement | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | Remarks |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|-----------------------------------------------------------------|--------------------|
| Firm or Individual name | Daniel J. Krueger | Regist. No. 42,771 |
| | Conley, Rose & Tayon, P.C., PO Box 3267, Houston, TX 77253-3267 | Tel. 713-238-8000 |
| Signature | | |
| Date | June 28, 2000 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: **June 28, 2000**

| | |
|-----------------------|------------------|
| Typed or printed name | Colleen F. Brown |
| Signature | |
| Date | June 28, 2000 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MAR178901910PTO TRANS 01



FEE TRANSMITTAL for FY 1999

Patent fees are subject to annual revision.
Small Entity payments must be supported by a small entity statement,
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$ 120.00)

Complete if Known

| | |
|----------------------|-------------------------|
| Application Number | 09/510,966 |
| Filing Date | February 21, 2000 |
| First Named Inventor | Rohit V. GAIKWAD et al. |
| Examiner Name | UNKNOWN |
| Group / Art Unit | 2734 |
| Attorney Docket No. | 1789-01910 |

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number
Deposit Account Name
Conley, Rose & Tayon, P.C.
03-2769

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

2. Payment Enclosed:

Check Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------------|----------------------------|-----------------------------------------------------------------------------------|---------------------------------|
| 105 | 130 | 205 65 Surcharge - late filing fee or oath | 65.00 |
| 127 | 50 | 227 25 Surcharge - late provisional filing fee or cover sheet. | |
| 139 | 130 | 139 130 Non-English specification | |
| 147 | 2,520 | 147 2,520 For filing a request for reexamination | |
| 112 | 920* | 112 920* Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 1,840* Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 55 Extension for reply within first month | 55.00 |
| 116 | 380 | 216 190 Extension for reply within second month | |
| 117 | 870 | 217 435 Extension for reply within third month | |
| 118 | 1,360 | 218 680 Extension for reply within fourth month | |
| 128 | 1,850 | 228 925 Extension for reply within fifth month | |
| 119 | 300 | 219 150 Notice of Appeal | |
| 120 | 300 | 220 150 Filing a brief in support of an appeal | |
| 121 | 260 | 221 130 Request for oral hearing | |
| 138 | 1,510 | 138 1,510 Petition to institute a public use proceeding | |
| 140 | 110 | 240 55 Petition to revive - unavoidable | |
| 141 | 1,210 | 241 605 Petition to revive - unintentional | |
| 142 | 1,210 | 242 605 Utility issue fee (or reissue) | |
| 143 | 430 | 243 215 Design issue fee | |
| 144 | 580 | 244 290 Plant issue fee | |
| 122 | 130 | 122 130 Petitions to the Commissioner | |
| 123 | 50 | 123 50 Petitions related to provisional applications | |
| 126 | 240 | 126 240 Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 40 Recording each patent assignment per property (times number of properties) | |
| 146 | 760 | 246 380 Filing a submission after final rejection (37 CFR 1.129(a)) | |
| 149 | 760 | 249 380 For each additional invention to be examined (37 CFR 1.129(b)) | |
| Other fee (specify) | | | |
| Other fee (specify) | | | |
| Reduced by Basic Filing Fee Paid | | | SUBTOTAL (3) (\$ 120.00) |

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|--------------------------------|----------------------------|-------------------------------|----------|
| 101 | 690 | 201 345 Utility filing fee | |
| 106 | 310 | 206 155 Design filing fee | |
| 107 | 480 | 207 240 Plant filing fee | |
| 108 | 690 | 208 345 Reissue filing fee | |
| 114 | 150 | 214 75 Provisional filing fee | |
| SUBTOTAL (1) (\$ - 0 -) | | | |

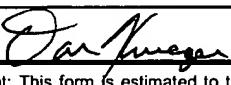
2. EXTRA CLAIM FEES

| Total Claims | -20** = | Extra Claims | Fee from below | Fee Paid |
|--------------------|---------|--------------|----------------|----------|
| Independent Claims | - 3** = | | | |
| Multiple Dependent | | | | |

** or number previously paid, if greater; For Reissues, see below

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|--------------------------------|----------------------------|------------------------------------------------------------------|
| 103 | 18 | 203 9 Claims in excess of 20 |
| 102 | 78 | 202 39 Independent claims in excess of 3 |
| 104 | 260 | 204 130 Multiple dependent claim, if not paid |
| 109 | 78 | 209 39 ** Reissue independent claims over original patent |
| 110 | 18 | 210 9 ** Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (2) (\$ - 0 -) | | |

SUBMITTED BY

| | | | | | |
|-----------------------|-------------------------------------------------------------------------------------|------|------------|-------------------------|--------|
| Typed or Printed Name | Daniel J. Krueger | | | Reg. Number | 42,771 |
| Signature |  | Date | 06/28/2000 | Deposit Account User ID | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

MAR1789-01910-PTO FEE TRANS 01